

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

ADVANCING FREEDOM FUND

ADDRESS (number and street) ▼

107 S WEST ST STE 493

☐ Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00570093

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

04

01

2016

06

30

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JORDAN MCGRAIN

Signature of Treasurer

JORDAN MCGRAIN

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

07

15

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ADVANCING FREEDOM FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		11307.01
(b) Cash on Hand at Beginning of Reporting Period.....	30550.23	
(c) Total Receipts (from Line 19)	120910.00	175699.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	151460.23	187006.01
7. Total Disbursements (from Line 31)	132245.27	167791.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19214.96	19214.96
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	4242.47	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ADVANCING FREEDOM FUND

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
04	/	01	/	2016

To:

M M M	/	D D D	/	Y Y Y Y Y
06	/	30	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

9275.00

(ii) Unitemized

117910.00

163424.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

117910.00

172699.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

117910.00

172699.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

3000.00

3000.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

120910.00

175699.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

120910.00

175699.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	127326.53	162757.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	127326.53	162757.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	4918.74	5033.74
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	4918.74	5033.74
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	132245.27	167791.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	132245.27	167791.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	117910.00	172699.00
34. Total Contribution Refunds (from Line 28(d))	4918.74	5033.74
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	112991.26	167665.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	127326.53	162757.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3000.00	3000.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	124326.53	159757.31

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

Advancing Freedom Fund (Committee) has established a policy and procedure for the collection of identification information consistent federal laws, rules and regulations including 11 CFR 100.12, 104.3(a)(4)(i) and 104.7. The Committee and its fundraising vendors follow this policy. Based on this policy, the Committee's policy accurately identifies individuals who contributed in excess of \$200 in a calendar year. The Committee provides the required identification information, including the full name, complete mailing address, occupation, and name of employer on this and all its campaign disclosure reports. The Committee's policy and procedures for the collection of contributor identification information are consistent with the Committee's obligation of compliance with the 'best efforts' standard established under regulations. Details of the Committee's policy and procedures can be found in the Miscellaneous Statement to the Commission made under ID FEC-1026196 filed on 09/28/15. Despite the Committee's adherence to the best efforts standards in its practices, contributors do not always provide the requested identification information. The Committee has endeavored to identify such records in the itemization information provided in this report.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 19

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : SA15.16014

Amount of Each Receipt this Period

500.00

☐ Memo Item

Refund of Service Fee

Full Name (Last, First, Middle Initial)

B. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 08 / 2016

Transaction ID : SA15.16028

Amount of Each Receipt this Period

500.00

☐ Memo Item

Refund of Service Fee

Full Name (Last, First, Middle Initial)

C. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : SA15.16029

Amount of Each Receipt this Period

500.00

☐ Memo Item

Refund of Service Fee

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 19

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2016

Transaction ID : SA15.16030

Amount of Each Receipt this Period

500.00

☐ Memo Item

Refund of Service Fee

Full Name (Last, First, Middle Initial)

B. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : SA15.16031

Amount of Each Receipt this Period

500.00

☐ Memo Item

Refund of Service Fee

Full Name (Last, First, Middle Initial)

C. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 06 / 2016

Transaction ID : SA15.16032

Amount of Each Receipt this Period

500.00

☐ Memo Item

Refund of Service Fee

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. American Liberty GroupMailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 07 / 2016**Transaction ID : SB21B.16043**

Amount of Each Disbursement this Period

33604.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Liberty GroupMailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 14 / 2016**Transaction ID : SB21B.16044**

Amount of Each Disbursement this Period

13757.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Liberty GroupMailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 22 / 2016**Transaction ID : SB21B.16045**

Amount of Each Disbursement this Period

16843.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64205.29

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. American Liberty GroupMailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 29 2016**Transaction ID : SB21B.16046**

Amount of Each Disbursement this Period

11796.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Liberty GroupMailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 06 2016**Transaction ID : SB21B.16047**

Amount of Each Disbursement this Period

9438.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Liberty GroupMailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 12 2016**Transaction ID : SB21B.16048**

Amount of Each Disbursement this Period

11172.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32406.34

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ADVANCING FREEDOM FUND

4987.50

 Memo Item

MM / DD / YYYY

1619.75

 Memo Item

A diagram of a rectangular frame with four vertical supports. The frame is represented by a rectangle with a thick border. Inside the rectangle, there are four vertical lines, one in each quadrant, representing supports. The top and bottom horizontal lines are thicker than the side vertical lines.

1240.42

 Memo Item

7847.67

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ADVANCING FREEDOM FUND

The date 06/17/2016 is displayed using a grid of squares. The first part shows '06' with 'M' above the first square and 'M' above the sixth square. The second part shows '17' with 'D' above the first square and 'D' above the seventh square. The third part shows '2016' with 'Y' above the first, third, fifth, and seventh squares. The grid is divided into three sections by slashes.

983.25

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

 Memo Item

11632.75

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

 Memo Item

Diagram of a rectangular channel with a width of 161.54.

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

 Memo Item

12777.54

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 19

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030
Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 01 2016
Transaction ID : SB21B.16042

Amount of Each Disbursement this Period

127.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Global Services

Mailing Address 10705 Red Run Blvd

City State Zip Code
Owings Mills MD 21117
Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 04 2016
Transaction ID : SB21B.16037

Amount of Each Disbursement this Period

1923.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Global Services

Mailing Address 10705 Red Run Blvd

City State Zip Code
Owings Mills MD 21117
Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 02 2016
Transaction ID : SB21B.16038

Amount of Each Disbursement this Period

2795.53

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4846.13

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 19

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. Global Services

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 02 2016
Transaction ID : SB21B.16039

Amount of Each Disbursement this Period

1428.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gober Hilgers

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 18 2016
Transaction ID : SB21B.16017

Amount of Each Disbursement this Period

460.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gober Hilgers

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 04 2016
Transaction ID : SB21B.16018

Amount of Each Disbursement this Period

65.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1953.92

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 19

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

City Austin State TX Zip Code 78734

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 28 2016
Transaction ID : SB21B.16021

Amount of Each Disbursement this Period

1540.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

City Austin State TX Zip Code 78734

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 04 2016
Transaction ID : SB21B.16022

Amount of Each Disbursement this Period

390.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

City Austin State TX Zip Code 78734

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 14 2016
Transaction ID : SB21B.16023

Amount of Each Disbursement this Period

250.03

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2180.03

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ADVANCING FREEDOM FUND

127106.89

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 19

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gober Hilgers

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

525.00

Transaction ID : SD10.11027

Amount Incurred This Period

0.00

Payment This Period

525.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide Compliance

Nature of Debt (Purpose):

Compliance Services

Mailing Address PO Box 341027

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

2782.50

Transaction ID : SD10.16011

Amount Incurred This Period

0.00

Payment This Period

2180.03

Outstanding Balance at Close of This Period

602.47

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide Compliance

Nature of Debt (Purpose):

Compliance Services

Mailing Address PO Box 341027

City

Austin

State

TX

Zip Code

78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.16024

Amount Incurred This Period

35.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

637.47

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 19

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City State
Austin TXZip Code
TX 78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.16025

Amount Incurred This Period

3010.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3010.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City State
Austin TXZip Code
TX 78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.16026

Amount Incurred This Period

455.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

455.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City State Zip Code
Austin TX 78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.16027

Amount Incurred This Period

140.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3605.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 OF 19

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ADVANCING FREEDOM FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Gober GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City State
Austin TXZip Code
TX 78734

Outstanding Balance Beginning This Period

294.97

Transaction ID : SD10.16009

Amount Incurred This Period

0.00

Payment This Period

294.97

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

4242.47

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

4242.47